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met Allowance CA Verified and Acknowledged Examiner's Signature Initials Allowance COUNTRY CA					DRA	EETS TOTA WING CLAII 22 84		MS	INDEPENDENT CLAIMS 13
ADDRESS Kevin L. Russell Suite 1600 601 SW Second A Portland, OR9720									
TITLE CHILD-BASED ST	ГОRY	TELLING ENVIRONM	IENT						
RECEIVED N	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:				☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other ☐ Credit				